



APPLICATION FOR FIVE-YEAR RENEWABLE COACHING PERMIT

PART I: PERSONAL INFORMATION (Print all information in dark ink and in uppercase letters.)

LAST NAME

FIRST NAME

MI

GENDER (M/F)

 - -

SOCIAL SECURITY NUMBER

 - -

BIRTH DATE (Month-Day-Year) – Required

ADDRESS (Street)

(Apt #)

(City)

(State)

(Zip Code)

FORMER LAST NAME(S)

 - -

PHONE

(Home)

 - -

(Work)

Race/Ethnicity

☐

(Optional)

1. Native American
2. Asian/Pacific Islander
3. Black
4. White
5. Hispanic

E-MAIL ADDRESS _____

1. Have you ever been convicted of **any** crime, excluding minor traffic violations? ☐ YES ☐ NO
2. Have you ever been dismissed for cause from any position? ☐ YES ☐ NO
3. Have you ever surrendered a professional certificate, license, permit or other credential (including, but not limited to, an education credential); had one revoked, suspended, annulled, invalidated, rejected or denied for cause; or been the subject of any other adverse or disciplinary credential action? ☐ YES ☐ NO

NOTE: If you answer “YES” to any of the above questions, you must attach a signed statement of explanation. If there are multiple incidents within each question, you must list and explain each separately. Submit **official** copies of court or administrative record(s), including disposition of each case.

Information on this application is subject to disclosure pursuant to the Freedom of Information Act.



PART II: COMPLETION OF REQUIRED FIRST AID COURSE

The first aid course must have been completed within **3 years** prior to the date of application. Please sign your first aid card and attach a photocopy of both the front and back of the first aid card to this application.

PART III: COMPLETION OF REQUIRED CPR COURSE

The CPR course must have been completed within **1 year** prior to the date of application. Please sign your CPR card and attach a photocopy of both the front and back of the CPR card to this application.

PART IV: HIGH SCHOOL INFORMATION

Please attach a copy of your high school diploma or official high school transcript to this application.

PART V: COMPLETION OF REQUIRED COACHING COURSE

(For individuals **NOT** holding a valid Connecticut educator certificate, or a standard or permanent certificate)

Course completed at: _____ Date course completed: _____
(Name of college/university or board of education)

PART VI: RENEWAL OF FIVE-YEAR RENEWABLE COACHING PERMIT

Have you completed at least 15 clock hours of seminars, course work or workshops which provide information on safe and healthful coaching practices and understanding child and adolescent development as approved by the State Department of Education?

☐ YES

☐ NO

PART VII: APPLICANT ATTESTATION

I certify that the information provided by me on this application and any accompanying documents contains no material misrepresentations, falsifications or omissions and that all of the information given by me is true, complete and accurate. I understand that all application and accompanying information may be verified and that any material misrepresentation, falsification or omission may result in the denial or revocation of my certificate(s), permit(s) or authorization(s). I further certify that I have attained the age of at least 18 years.

ORIGINAL SIGNATURE OF APPLICANT

DATE:

Original Signature Must Be On Form Submitted

ED 185

REV. 5/03

C.G.S. 10-145

C.G.S. 10-145d, P.A. 03-168

Regs. 10-145d-423

CONNECTICUT STATE DEPARTMENT OF EDUCATION

Bureau of Educator Preparation and Certification

P.O. Box 150471 – Room 243

Hartford, CT 06115-0471

www.state.ct.us/sde

INSTRUCTIONS TO APPLICATION FOR
FIVE-YEAR RENEWABLE COACHING PERMIT

THIS CHECKLIST MUST BE ATTACHED TO THE COMPLETE APPLICATION PACKET

Listed below are the required documents which must be submitted to the Bureau of Educator Preparation and Certification to process your request for the issuance or renewal of a Five-Year Renewable Coaching Permit.

For the ISSUANCE of a Five-Year Renewable Coaching Permit you must complete and submit the following:

Applicant:

- ☐ 1. If you do NOT hold a valid Connecticut educator certificate, or a standard or permanent certificate, please complete sections a through f of the instructions below.
- ☐ 2. If you hold a valid Connecticut educator certificate, or a standard or permanent certificate, please complete sections a, b, c and f of the instructions below.

Instructions:

- ☐ a. Complete Parts I through V and Part VII of the application. (Applicants who hold a valid Connecticut educator certificate, or a standard or permanent certificate, need not complete Parts IV or V).
- ☐ b. Attach a photocopy of your Standard First Aid card. The Standard First Aid course must be completed within three years prior to the date of application. **Please remember to sign your Standard First Aid card prior to photocopying.**
- ☐ c. Attach a photocopy of your CPR card, verifying the successful completion of the CPR course within one year prior to the date of application. **Please remember to sign your CPR card prior to photocopying.**
- ☐ d. Attach a photocopy of your high school diploma or its equivalent. An official high school transcript may be submitted in lieu of a copy of your diploma.
- ☐ e. Attach an official transcript verifying the completion of an approved coaching course.
- ☐ f. Return completed application and attachments to the Bureau of Educator Preparation and Certification.

(continued)

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For the RENEWAL of a Five-Year Renewable Coaching Permit:

Instructions:

- ☐ a. Complete Parts I through III and Parts VI and VII.
- ☐ b. Attach a photocopy of your Standard First Aid card. The Standard First Aid course must be completed within three years prior to the date of application. **Please remember to sign your Standard First Aid card prior to photocopying.**
- ☐ c. Attach a photocopy of your CPR card, verifying the successful completion of the CPR course within one year prior to the date of application. **Please remember to sign your CPR card prior to photocopying.**
- ☐ e. Return completed application and attachments to the Bureau of Educator Preparation and Certification.

NOTE: Please do NOT submit verification of completion of the required 15 clock hours of seminars, course work or workshops for the renewal of the Five-Year Renewable Coaching Permit with this application. Applicants selected for a random audit will be notified in writing, and be required to submit verification.

<p><i>How to contact the Bureau of Educator Preparation and Certification:</i></p>

E-mail:	teacher.cert@po.state.ct.us
Website:	www.state.ct.us/sde
FAX:	860-713-7017
PHONE:	860-713-6969 24-hour Interactive Voice Response (IVR) for applicants. (To speak with a staff member, call the IVR weekdays, between 1-5 p.m.)